405 IAC 1-15-3 General requirements

Authority: IC 12-8-6-5; IC 12-15-1-10; IC 12-15-21-2

Affected: IC 12-13-7-3; IC 12-15

Sec. 3. (a) The office shall do the following:

- (1) Adopt a schedule for nursing facility MDS data electronic transmission, based on the federal assessment schedule established by HCFA.
- (2) Specify the method by which data shall be transmitted to the office, or its contractor, by nursing facilities.
- (3) Provide nursing facilities with technical support in preparing MDS transmission to the office, or its contractor, including, but not limited to, the following:
 - (A) Providing training on the transmission of MDS data.
 - (B) Establishing standards for computer software and hardware for use in MDS data transmission.
 - (C) Any other support that the office deems necessary for successful transmission of MDS data.
- (b) Allowable costs incurred by nursing facilities relating to transmission of MDS data to the office shall be reimbursed through the cost reporting mechanism established under 405 IAC 1-14.6.

405 IAC 1-15-4 MDS Supporting Documentation Requirements

Authority: IC 12-8-6-5; IC 12-15-1-10; IC 12-15-21-2

Affected: IC 12-13-7-3; IC 12-15

- Sec. 4. (a) The office shall publish supporting documentation guidelines for all MDS data elements that are utilized to classify nursing facility residents in accordance with the RUG-III resident classification system. The guidelines shall be published as a provider bulletin, and may be updated by the office as needed. Any such updates shall be made effective no earlier than permitted under I.C. 12-15-13-6(a).
- (b) Nursing facilities shall maintain supporting documentation in the resident's medical chart for all MDS data elements that are utilized to classify nursing facility residents in accordance with the RUG-III

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resident classification system. Such supporting documentation shall be maintained by the nursing facility for all residents in a manner that is accessible and conducive to audit.

405 IAC 1-15-5 MDS Audit Requirements

Authority: IC 12-8-6-5; IC 12-15-1-10; IC 12-15-21-2

Affected: IC 12-13-7-3; IC 12-15

- Sec. 5. (a) The office or its contractor shall periodically audit the MDS supporting documentation maintained by nursing facilities for all residents, regardless of payer type. Such audits shall be conducted as frequently as deemed necessary by the office, and each nursing facility shall be audited no less frequently than every fifteen (15) months.
- (b) The MDS assessments subject to audit will include those assessments most recently transmitted to the office or its contractor in accordance with section 1 of this rule. The office may audit additional MDS assessments if it is deemed necessary.
- (c) When conducting the MDS audits, the office or its contractor shall consider all MDS supporting documentation that is provided by the nursing facility and is available to the auditors prior to the exit conference, which shall occur at the conclusion of the audit. MDS supporting documentation that is provided by the nursing facility after the exit conference shall not be considered by the office.
- (d) The nursing facility shall be required to produce upon request by the office or its contractor, a computer generated copy of the MDS assessment that is transmitted in accordance with section 1 of this rule, which shall be the basis for the MDS audit.

405 IAC 1-15-6 MDS Assessment Requirements

Authority: IC 12-8-6-5; IC 12-15-1-10; IC 12-15-21-2

Affected: IC 12-13-7-3; IC 12-15

Sec. 6. (a) Nursing facilities shall complete and transmit to the office or its contractor a new full MDS assessment for all residents after the conclusion of all physical, speech and occupational therapies. Such new full assessments shall be completed in order that the MDS assessment

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reference date (A3a) shall be no earlier than eight (8) days, and no later than ten (10) days after the conclusion of all physical, speech and occupational therapies. If the resident expires or is discharged from the facility, no such new full assessment is required.

405 IAC 1-15-7 Nursing Restorative Programs

State: Indiana

Authority: IC 12-8-6-5; IC 12-15-1-10; IC 12-15-21-2

Affected: IC 12-13-7-3; IC 12-15

Sec. 7. (a) For purposes of determining the amount of nursing restorative care that is credited to nursing facility residents that participate in group programs, the following MDS completion guideline shall apply. If an individual nursing facility resident is participating in a group nursing restorative program of four (4) or fewer participants, then the full amount of nursing restorative time shall be documented and recorded for all participants in such nursing restorative program.

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